

DTW

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/650112
		Filing Date	August 26, 2003
		First Named Inventor	Sanford D. Markowitz
		Examiner Name	S. L. Rawlings
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1642
TOTAL AMOUNT OF PAYMENT		Attorney Docket No.	CWRU-P01-044

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>18-1945</u> Deposit Account Name: <u>Ropes & Gray LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
							Small Entity
Fee Description							Fee (\$) Fee (\$)
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							200 100
Multiple dependent claims							360 180
Total Claims Extra Claims Fee (\$) Fee Paid (\$)							Multiple Dependent Claims
_____ - = _____ x _____ = _____							Fee (\$) Fee Paid (\$)
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							
_____ - = _____ x _____ = _____							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
_____ - 100 = _____		/50	_____ (round up to a whole number) x _____		= _____		
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>2253 Extension for response within third month</u>							<u>510.00</u>

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	47,874
Name (Print/Type)	John D. Quisel	Telephone	(617) 951-7685
		Date	November 14, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: <u>11/14/05</u>	Signature: (Christine Colbert)



I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 11/14/05

Signature

Christine Colbert
(Christine Colbert)

Docket No.: CWRU-P01-044
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Sanford D. Markowitz

Application No.: 10/650112

Confirmation No.: 5888

Filed: August 26, 2003

Art Unit: 1642

For: METHODS FOR TREATING PATIENTS AND
IDENTIFYING THERAPEUTICS

Examiner: S. L. Rawlings

REQUEST FOR EXTENSION OF TIME

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby petitions for a three month extension of time to and including November 14, 2005 to respond to the Office Action mailed May 12, 2005.

This petition is being filed in order to ensure copendency with a continuation application filed November 14, 2005.

Please charge our Deposit Account No. 18-1945 in the amount of \$510.00 covering the fee set forth in 37 CFR 1.17(a)(3). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper

11/17/2005 CCHAU1 00000030 181945 10650112

01 FC:2253 510.00 DA

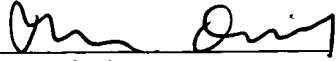
Application No.: 10/650112

Docket No.: CWRU-P01-044

hereafter filed in this application by this firm) to our Deposit Account No. 18-1945, under Order No. CWRU-P01-044. A duplicate copy of this paper is enclosed.

Dated: November 14, 2005

Respectfully submitted,

By 

John D. Quisel

Registration No.: 47,874

ROPES & GRAY LLP

One International Place

Boston, Massachusetts 02110-2624

(617) 951-7000

(617) 951-7050 (Fax)

Attorneys/Agents For Applicant